

Based on our results, we believe that the production of gastric lesions in HSF1-null mice is due to their inability to express protective HSPs, leading to apoptosis of the gastric mucosal cells. Although oral administration of ethanol led to the production of gastric lesions, there was a concomitant up-regulation of HSPs (Figs. 2 and 3), with significantly fewer apoptotic cells being recorded in wild-type mice than in HSF1-null mice (Fig. 4). Induction of necrosis by ethanol may also be stimulated in HSF1-null mice, because up-regulation of HSPs made gastric mucosal cells resistant to ethanol-induced necrosis (Tomisato et al., 2001). Other factors that are believed to be involved in the production of gastric lesions, including gastric acid secretion, GMBF and PGE₂ levels, were similar in both wild-type and HSF1-null mice (Fig. 6). Artificial pre-induction of HSPs renders cultured gastric mucosal cells resistant to ethanol-induced apoptosis (Mizushima et al., 1999). Among the various HSPs tested, oral administration of ethanol up-regulated only HSP70 in terms of protein level (Fig. 2B). Furthermore, HSP70 is thought to be the major anti-apoptotic HSP; either HSP70 binds to Apaf-1, thereby preventing activation of caspases, or HSP70 suppresses the apoptotic pathway downstream of caspase-3 activation and apoptosis-inducing factor (AIF)-induced

chromatin condensation (Beere et al., 2000; Jaattela et al., 1998; Ravagnan et al., 2001; Saleh et al., 2000). However, despite the apparent significance of HSP70, it should still be noted that loss of the *hsfl* gene also decreased the background level of other HSPs (Fig. 2B), which may play some role in the HSF1-dependent protection of the gastric mucosa. It is also possible that the production of gastric lesions in HSF1-null mice involves other mechanisms, suggested in recent papers (Fujimoto et al., 2005; Inouye et al., 2003). For example, HSF1-null mice display elevated levels of tumor necrosis factor (TNF)- α , a pro-inflammatory cytokine, and are susceptible to increased mortality following endotoxic or inflammatory challenge (Wirth et al., 2004; Xiao et al., 1999). Given that it is well known that pro-inflammatory cytokines, including TNF- α stimulate the production of gastric lesions, it remains possible that the development of such lesions in HSF1-null mice involves elevated levels of TNF- α . In addition, involvement of iNOS is also possible, because it has been shown that iNOS is involved in tissue damage and over-expression of HSP70 has been shown to inhibit iNOS and ameliorate the damage (Kiang, 2004; Pittet et al., 2002).

GGA has attracted considerable attention as an HSP-inducer, largely due to its clinical value as an anti-ulcer drug and because it can induce HSPs without affecting cell viability (Hirakawa et al., 1996). GGA has been suggested to play a protective role through HSP-induction in a variety of disease states; oral administration of GGA up-regulates HSPs in brain and heart and exerts a protective effect against spinal and bulbar muscular atrophy, cerebral ischemia and ischemic heart disease (Katsuno et al., 2005; Ooie et al., 2001; Yasuda et al., 2005). However, no previous reports have shown that the HSP-inducing activity of GGA contributes to these clinically beneficial outcomes, including its anti-ulcer effects. In this study, using immunohistochemical analysis, we have demonstrated that oral administration of GGA alone up-regulates gastric mucosal HSP70, and that pre-administration of GGA stimulates the ethanol-induced up-regulation of HSP70. Furthermore, we have revealed that pre-administration of GGA suppresses gastric lesions in wild-type mice but not in HSF1-null mice. These results argue strongly in favour of the HSP-inducing activity of GGA contributing to its anti-ulcer effects, providing the first direct genetic link between the pharmacological behaviour of the drug and the resultant clinical outcome.

In summary, this study provides direct genetic evidence suggesting that HSPs, following their HSF1-dependent up-regulation, confer protection against the development of gastric lesions.

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FOOTNOTES

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FIGURE LEGENDS**Fig. 1.**

Production of gastric lesions in wild-type and HSF1-null mice. Wild-type (A-C) and HSF1-null mice (B-C) were orally administered the indicated doses of ethanol (A-B) or hydrochloric acid (C). After 4 h, the stomach was removed and scored for hemorrhagic damage. Values are mean \pm S.E.M. (n=4-6). ** P <0.01.

Fig. 2.

HSF1-dependent up-regulation of gastric mucosal HSPs induced by ethanol. Wild-type and HSF1-null mice were orally administered the indicated doses of ethanol (A, B). After 4 h, the gastric mucosa was removed and total RNA was extracted. Samples were subjected to real-time RT-PCR, using a specific primer for each gene. Values normalized to the *GAPDH* gene, and expressed relative to the control sample (i.e. wild-type mice not exposed to ethanol), are given as the mean \pm S.E.M. (n=3). *** P <0.001, ** P <0.01, * P <0.05 (A). After 4 h, the gastric mucosa was removed, and protein

extracts were prepared and analysed by immuno-blotting with an antibody against HSP25, HSP60, HSP70, HSP90, or actin. The band intensity of each HSP was determined by densitometric scanning, normalized with its respective actin intensity and the value of the ratio of band intensity between each HSP and the actin was shown under the band (B).

Fig. 3.

Ethanol-induced HSF1-dependent up-regulation of HSP70 in gastric mucosa. Wild-type (A) and HSF1-null mice (B) were orally administered the indicated doses of ethanol. After 4 h, sections of gastric tissues were prepared and subjected to histological examination (HE) and immunohistochemical analysis with an antibody against HSP70.

Fig. 4.

Induction of apoptosis by ethanol in gastric mucosa. Wild-type and HSF1-null mice were orally administered the indicated doses of ethanol. After 4 h, sections of gastric tissues were prepared and subjected to TUNEL assay.

Fig. 5.

Effect of increase or decrease in the expression of HSP70 on ethanol-induced cell death. AGS cells were transfected with plasmid with the *hsp70* gene (A, B) or siRNA for the *hsp70* gene (siHSP70) or non-silencing siRNA (ns) (C, D). After 24 h, cells were incubated with or without 7% ethanol for 1 h. The levels of HSP70 and actin were estimated by immuno-blotting with an antibody against HSP70 or actin (A, C). Cell viability was determined by MTT method. Values shown are mean \pm S.D. (n=3).

*** $P < 0.001$; * $P < 0.05$. n.s., not significant.

Fig. 6.

Gastric acid secretion, GMBF and PGE₂ levels in HSF1-null mice. The pylorus-ligated wild-type mice were administered 20 mg/kg histamine (s.c.) (A). Wild-type and HSF1-

null mice were orally administered 40% ethanol, and 2 h later the pylorus was ligated (B). A further two hours after the pylorus ligation, the acidity of the gastric contents was measured, as described in materials and methods (A, B) (n=3-4). After exposure of the stomach and GMBF stabilization, PGE₂ (0.03 mg/kg) was administered intravenously via the tail vein of wild-type and HSF1-null mice and changes in GMBF were monitored (C) (n=6). Wild-type and HSF1-null mice were orally administered 40% ethanol. After 4 h, the gastric mucosal PGE₂ level was determined by ELISA (D) (n=3-4). n.s., not significant.

Fig. 7.

Effect of ethanol and/or GGA on expression of HSP70 and production of gastric lesions. Wild-type (A, C) and HSF1-null (B, C) mice were orally pre-administered 200 mg/kg GGA (10 ml/kg as emulsion with 5% gum arabic), 1 h after which they were orally administered with the indicated doses of ethanol. After 4 h, sections of gastric tissues were prepared and subjected to histological examination (HE) and immunohistochemical analysis with an antibody against HSP70 (A, B). After 4 h, the

stomach was removed and scored for hemorrhagic damage. Values are mean \pm S.E.M.

(n=3-6). * $P < 0.05$. n.s., not significant (C).